Irvin Wimer, In re Laura Wimer

Case No.	2:15-bk-54429

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H W J C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	COZH — ZGEZ	>0-C0-rzc	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.			2/2012	T	ĀTED			
GM Financial Po Box 183834 Arlington, TX 76096		н	PMSI 2007 Chevy Impala 78,000 miles Debtor's Possession		ט			
			Value \$ 6,800.00			Ц	7,869.60	1,069.60
Account No. Account No.			Value \$					
Account No.			Value \$	•				
			Value \$					
continuation sheets attached			S (Total of th	ubt his p		- 1	7,869.60	1,069.60
			(Report on Summary of Sc		ota ule	- 1	7,869.60	1,069.60

Fill in this inform	nation to identify your case:	
Debtor 1	Irvin Wimer	
Debtor 2 (Spouse, if filing)	Laura Wimer	
United States Ba	ankruptcy Court for the: SOUTHERN DISTRICT OF OHIO	
Case number	2:15-bk-54429	Check if this is:
(If known)		 An amended filing A supplement showing post-petition chapter 13 income as of the following date:
Official Fo	orm B 6I	MM / DD/ YYYY

Official Form B 61

Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. If you have more than one job, Employed Employed **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation Maintenance **Temp** Include part-time, seasonal, or Employer's name **Reliable Staffing G&J Pepsi-Cola** self-employed work. Occupation may include student **Employer's address** 9435 Waterstone Blvd. 4129 W. Broad St. or homemaker, if it applies. Suite 390 Columbus, OH 43229 Cincinnati, OH 45249 How long employed there? 14 years 3 weeks

Give Details About Monthly Income Part 2:

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1

For Debtor 2 or

non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 2. 3,971.07 390.00 deductions). If not paid monthly, calculate what the monthly wage would be. 1,191.15 Estimate and list monthly overtime pay. 0.00 Calculate gross Income. Add line 2 + line 3. 5,162.22 390.00

Case number (if known)

2:15-bk-54429

					Fo	r Debtor 1		or Debtor 2 or on-filing spouse	
	Cop	y line 4 here		4.	\$	5,162.22		390.00	
5.	List	all payroll deduc	tions:						
	5a. 5b. 5c. 5d. 5e. 5f. 5f. 5g.	Tax, Medicare, Mandatory cont Voluntary contr Required repay Insurance Domestic supp Union dues	and Social Security deductions tributions for retirement plans ributions for retirement plans ments of retirement fund loans	5a 5b 5c 5d 5e 5f 5g 5h	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	1,290.55 0.00 134.33 204.58 475.89 0.00 0.00 83.33	\$ \$ \$ \$ \$	102.92 0.00 0.00 0.00 0.00 0.00 0.00 0.00	
6.	Add	the payroll deduc	ctions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	2,188.68	\$	102.92	
7.	Calc	culate total month	lly take-home pay. Subtract line 6 from line 4.	7.	\$	2,973.54	\$	287.08	
8.	8b. 8c.	Net income from profession, or fattach a statemer receipts, ordinar monthly net incollinerest and divide Family support regularly received include alimony,	ent for each property and business showing gross y and necessary business expenses, and the total one. ridends payments that you, a non-filing spouse, or a depend	8a 8b ent 8c	. \$_	0.00 0.00	\$	0.00 0.00	
	8d.	Unemployment		8d	· -	0.00	_	0.00	
	8e.	Social Security		8e	. \$	0.00	\$	0.00	
	8f. 8g. 8h.	Include cash ass that you receive, Nutrition Assista Specify: Pension or retir	ent assistance that you regularly receive sistance and the value (if known) of any non-cash assistate, such as food stamps (benefits under the Supplemental nce Program) or housing subsidies. rement income income. Specify:	8f. 8g 8h	. \$	0.00 0.00 0.00	\$	0.00 0.00 0.00	
9.	Add	all other income.	. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	0.00	\$	0.00	
10.		-	come. Add line 7 + line 9. 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	2,973.54 +	·	287.08 = \$ 3,260.6	32
11.	Inclu othe	ide contributions fr r friends or relative not include any am	r contributions to the expenses that you list in Sched om an unmarried partner, members of your household, yes. ounts already included in lines 2-10 or amounts that are	our depe					<u> </u>
12.		e that amount on t	e last column of line 10 to the amount in line 11. The the Summary of Schedules and Statistical Summary of Co.						62
13.	Do y	ou expect an inc	rease or decrease within the year after you file this fo	orm?				monthly incom	a
		Yes. Explain:	Debtor's employer just finished a large project generated a significant amount of overtime will work 40 to 48 hours a week. Co-Debtor works for a temp agency. The hour works. The income is very inconsistent and reper week. The hourly rate is usually about \$9.	hich De rs and lot relia	btor hourl ble.	will no longer y rate vary de Generally she	be repend may	eceiving, he expects to ing on the event/job sh	ne

Fill	in this information to identify your case:			
Deb	tor 1 Irvin Wimer		Check if this is:	
			An amended filing	
Deb	tor 2 Laura Wimer	1		wing post-petition chapter
(Spo	ouse, if filing)		13 expenses as of	the following date:
Unit	ed States Bankruptcy Court for the: SOUTHERN DISTRICT OF OHIC)	MM / DD / YYYY	
	e number 2:15-bk-54429	1	A separate filing for 2 maintains a separate	or Debtor 2 because Debtor
(If K	nown)		z mamams a sepa	arate nousenoid
0	fficial Form B 6J			
S	chedule J: Your Expenses			12/13
Be info	as complete and accurate as possible. If two married people a prmation. If more space is needed, attach another sheet to this nber (if known). Answer every question.			
Par 1.	t 1: Describe Your Household Is this a joint case?			
1.	□ No. Go to line 2.			
	Yes. Does Debtor 2 live in a separate household?			
	<u> </u>			
	■ No☐ Yes. Debtor 2 must file a separate Schedule J.			
2.	Do you have dependents? ■ No			
	Do not list Debtor 1 Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
	Do not state the			□ No
	dependents' names.			Yes
				□ No
		-		☐ Yes ☐ No
				☐ Yes
		-		□ No
				□ Yes
3.	Do your expenses include ■ No			_ 100
	expenses of people other than			
	yourself and your dependents?			
Par	t 2: Estimate Your Ongoing Monthly Expenses			
exp	imate your expenses as of your bankruptcy filing date unless your bankruptcy is filed. If this is a suppolicable date.			
•				
the	lude expenses paid for with non-cash government assistance value of such assistance and have included it on <i>Schedule I</i> : ficial Form 6I.)		Your exp	enses
`				
4.	The rental or home ownership expenses for your residence. payments and any rent for the ground or lot.	Include first mortgage	l. \$	445.00
	If not included in line 4:			
	4a. Real estate taxes	48	a. \$	0.00
	4b. Property, homeowner's, or renter's insurance	41	o. \$	0.00
	4c. Home maintenance, repair, and upkeep expenses		c. \$	25.00
_	4d. Homeowner's association or condominium dues		d. \$	0.00
5.	Additional mortgage payments for your residence, such as he	ome equity loans	5. \$	0.00

i, heat, natural gas wer, garbage collection e, cell phone, Internet, satellite, and cable services ecify: ekeeping supplies children's education costs dry, and dry cleaning products and services ental expenses Include gas, maintenance, bus or train fare. ear payments. clubs, recreation, newspapers, magazines, and books	6a. 6b. 6c. 6d. 7. 8. 9. 10.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	250.00 0.00 203.54 0.00 625.00 0.00
wer, garbage collection e, cell phone, Internet, satellite, and cable services ecify: ekeeping supplies children's education costs dry, and dry cleaning products and services ental expenses . Include gas, maintenance, bus or train fare. ear payments.	6b. 6c. 6d. 7. 8. 9.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 203.54 0.00 625.00
wer, garbage collection e, cell phone, Internet, satellite, and cable services ecify: ekeeping supplies children's education costs dry, and dry cleaning products and services ental expenses . Include gas, maintenance, bus or train fare. ear payments.	6b. 6c. 6d. 7. 8. 9.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 203.54 0.00 625.00
e, cell phone, Internet, satellite, and cable services ecify: sekeeping supplies children's education costs dry, and dry cleaning products and services ental expenses . Include gas, maintenance, bus or train fare. ear payments.	6c. 6d. 7. 8. 9.	\$	203.54 0.00 625.00
ecify: sekeeping supplies children's education costs dry, and dry cleaning products and services ental expenses Include gas, maintenance, bus or train fare. ear payments.	6d. 7. 8. 9. 10.	\$ \$ \$ \$	0.00 625.00
sekeeping supplies children's education costs dry, and dry cleaning products and services ental expenses . Include gas, maintenance, bus or train fare. ear payments.	7. 8. 9. 10.	\$ \$ \$	625.00
children's education costs dry, and dry cleaning products and services ental expenses Include gas, maintenance, bus or train fare. ear payments.	8. 9. 10.	\$	
Iry, and dry cleaning products and services ental expenses Include gas, maintenance, bus or train fare. ear payments.	9. 10.	\$	0.00
products and services ental expenses Include gas, maintenance, bus or train fare. ear payments.	10.		
ental expenses Include gas, maintenance, bus or train fare. ar payments.		\$	50.00
Include gas, maintenance, bus or train fare.	11.	_	75.00
ar payments.		\$	100.00
	12.	ф	417.08
clubs, recreation, newspapers, magazines, and books		·	
	13.	-	150.00
tributions and religious donations	14.	\$	0.00
, , ,	45-	Φ.	
		-	0.00
			0.00
		·	170.00
urance. Specify:	15d.	\$	0.00
nclude taxes deducted from your pay or included in lines 4 or 20.			
	16.	\$	0.00
		_	
			0.00
	_		0.00
		· ·	0.00
ecify:	17d.	\$	0.00
	as	•	0.00
your pay on line 5, Schedule I, Your Income (Official Form 6I).	18.	· ·	0.00
s you make to support others who do not live with you.		\$	0.00
			0.00
		· .	0.00
homeowner's, or renter's insurance	20c.	\$	0.00
nce, repair, and upkeep expenses	20d.	\$	0.00
ner's association or condominium dues	20e.	\$	0.00
Grooming	21.	+\$	100.00
	22.	\$	2,610.62
, ,			
	23a.	\$	3,260.62
			2,610.62
	200.	*	2,010.02
	23c.	\$	650.00
	recify: so of alimony, maintenance, and support that you did not report your pay on line 5, Schedule I, Your Income (Official Form 6I). In your pay on line 5, Schedule I, Your Income (Official Form 6I). In your make to support others who do not live with you. The expenses not included in lines 4 or 5 of this form or on So is on other property the taxes to homeowner's, or renter's insurance ince, repair, and upkeep expenses iner's association or condominium dues Grooming Expenses. Add lines 4 through 21. For monthly expenses. The expenses in the second in the secon	ance surance 15a. Surance 15b. Issurance 15c. Iurance. Specify: 15d. Include taxes deducted from your pay or included in lines 4 or 20. Idease payments: Itents for Vehicle 1 17a. Inents for Vehicle 2 17b. Inents for Vehicle 2 17c. Inectify: 17c. In of alimony, maintenance, and support that you did not report as your pay on line 5, Schedule I, Your Income (Official Form 6i). In on other property 19. In on other property 20a. In the taxes 20b. In homeowner's, or renter's insurance 20c. Ince, repair, and upkeep expenses 20d. In or on	surance surance. Specify: